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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
(LHTLG No. 03,139)

In re Application of:

Robert E. Mitchell)	Examiner: Firdic, Jr., Williamson
Serial No. 10/767,183)	Group Art Unit: 3722
Filed: 29-January-2004)	Confirmation No. 4646
For: ADVERTISING MATERIALS AND METHOD FOR COOPERATIVE PROMOTIONS)	
U.S. Patent No. 7,007,979)	
Issued: March 7, 2006)	

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

FACSIMILE TRANSMITTAL LETTER
(2 pages including this page)

1. We are transmitting herewith the attached papers for the above identified patent application:

Request for Withdrawal as Attorney or Agent and Change of Correspondence Address
37 C.F.R. §1.36 (1 page).
2. **FEES:** No fee is required.
3. **GENERAL AUTHORIZATION TO CHARGE OR CREDIT FEES:** Please charge any additional fees or credit overpayment to Deposit Account No. 50-2281 for Lesavich High-Tech Law Group, PC.
4. **CERTIFICATE OF TRANSMISSION UNDER 37 CFR § 1.8:** The undersigned hereby certifies that this Transmittal Letter and the papers, as described in paragraph 1 hereinabove, are being facsimile transmitted to United States Patent and Trademark Office (USPTO centralized facsimile number 571-273-8300) on this 20th day of December, 2006.

Lesavich High-Tech Law Group, P.C.

December 20, 2006


Stephen Lesavich
Registration No. 43,749

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PTO/SB/83 (01-06)

Approved for use through 12/31/2016. OMB 0651-0035
U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE

REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS 37 C.F.R. §1.36		Application Number 10/767,183												
		Filing Date January 29, 2004												
		First Named Inventor Mitchell												
		Art Unit 3722												
		Examiner Name Willmon Fridie, Jr.												
		Attorney Docket Number 03,139												
<p>To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Please withdraw me as attorney or agent for the above identified patent application, and</p> <p><input type="checkbox"/> All the attorneys/agents of record</p> <p><input type="checkbox"/> The attorney/agents (with registration numbers listed on the attached paper(s), or</p> <p><input checked="" type="checkbox"/> All the attorneys/agents associated with Customer Number 32097</p> <p>The reasons for this request are:</p> <p><u>The Applicant has declined to pay for the Attorney for further services and has declined to pay the Attorney for a large outstanding balance for services already rendered.</u></p>														
CORRESPONDENCE ADDRESS														
<p>1. <input type="checkbox"/> The correspondence address is NOT affected by this withdrawal.</p> <p>2. <input checked="" type="checkbox"/> Change the correspondence address and direct all future correspondence to:</p> <p><input type="checkbox"/> The address associated with Customer Number: _____</p>														
<p>OR</p> <table border="1"> <tr> <td><input checked="" type="checkbox"/> Individual Name Mr. Robert Mitchell</td> <td colspan="2"></td> </tr> <tr> <td colspan="3"> <p>Address F.A.C.E. Trading Inc. 5330 – 50th Street</p> </td> </tr> <tr> <td>City Kenosha</td> <td>State Wisconsin</td> <td>Zip 53144</td> </tr> <tr> <td colspan="2">Telephone 262.945.9530</td> <td>Email chip@couponroad.net</td> </tr> </table>			<input checked="" type="checkbox"/> Individual Name Mr. Robert Mitchell			<p>Address F.A.C.E. Trading Inc. 5330 – 50th Street</p>			City Kenosha	State Wisconsin	Zip 53144	Telephone 262.945.9530		Email chip@couponroad.net
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Signature														
Name Stephen Lesavich, PhD	Registration No. 43,749													
Date December 20, 2006	Telephone No. 312.332.3751													
NOTE: Withdrawal is effective when approved rather than when received. Unless there is at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request is normally disapproved.														